

## **DECLARATION AND POWER OF ATTORNEY FOR UNITED STATES PATENT APPLICATION**

X	Original		Supplemental		Substitute		
As a	below named inventor, I here	by de	eclare that:				
	·	•		mv r	name, and		
My residence, post office address and citizenship are as stated below next to my name, and I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if more than one name is listed below) of the subject matter which is claimed and for which a United States patent is sought on the invention entitled							
STABLE PHARMACEUTICAL COMPOSITION COMPRISING ERYTHROPOIETIN							
the s	pecification of which:						
	is attached hereto.						
	was filed on (day	y/mon	as Application No				
	and, if this box ( $\square$ ) contain	ıs an	×				
	☐ was amended on						
	•	(da	y/month/year)				
×	was filed as Patent Coope	was filed as Patent Cooperation Treaty international Application No.					
	PCT/SI 03/00023		on 14/07/2003 (day/month/year)				
	and, if this box (□) contains an ×						
	entered the national stage in the United States and was accorded Application No.						
	and, if this box (□) contain	ıs an	*				
	□ was amended, sub-	sequ	uent to entry into the national stage, or	1			
				_	(day/month/year)		

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment(s) specifically referred to above and, if this application was filed as a Patent Cooperation Treaty international application, by any amendments made during the international stage (including any made under Patent Cooperation Treaty Rule 91, Article 19 and Article 34).

I acknowledge my duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56, including, for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or Patent Cooperation Treaty international filing date of the continuation-in-part application.

I hereby claim the benefit under 35 U.S.C. 119(a)-(d) or (f) or 365(b) of any foreign application(s) for patent, inventor's certificate or plant breeder's right certificate listed below and under 35 U.S.C. 365(a) of any Patent Cooperation Treaty international application(s) designating at least one country other than the United States listed below and have also listed below any foreign application(s) for patent, inventor's certificate or plant breeder's right certificate and Patent Cooperation Treaty international application(s) designating at least one country other than the United States for the same subject matter and having a filing date before that of the application the priority of which is claimed for that subject matter:

COUNTRY/REGION (OR P.C.T.)	APPLICATION No.	FILING DATE (day/month/year)	P	PRIORITY CLAIME		IMED
Slovenia	P200200178	17/07/2002	X	Yes		No
				Yes		No
				Yes		No
				Yes		No
				Yes		No
	fit under 35 U.S.C. 119(e) o	of any United States pro	_			
I hereby claim the benef below:	fit under 35 U.S.C. 119(e) (	of any United States pro	visiona	al applica	ation(s	)
APPLICATION NO.		FILING DATE (day/month/year)				

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s) listed below and under 35 U.S.C. 365(c) of any Patent Cooperation Treaty international application(s) designating the United States listed below:

United States	United States	Status (Pending,	International		
Application No.	Filing Date	Abandoned or U.S.	Application No.	and Filing Date	
	(day/month/year)	Patent No.)		(day/month/year)	

I hereby appoint all of the registered practitioners associated with Customer No. 001095, respectively and individually, as my attorneys and agents, with full power of substitution and revocation. to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

If this box (□) contains an x 区, I hereby authorize the registered practitioners associated with Customer No. 001095 and any others acting on my behalf to take any action relating to this application based on communications from Corporate Intellectual Property of Novartis International AG. Basle. Switzerland, or an affiliate thereof or a successor thereto, without direct communication from me.

Please send all correspondence relating to this application to the address associated with Customer No. 001095.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full name of sole or first joint inventor	Andreja VUKMIROVIC		
Inventor's signature	<del></del>	Date _	(day/month/year)
Residence	1000 Ljubljana, Slovenia		
Citizenship	citizen of Slovenia		
Post Office Address	Dergomaska 16 1000 Ljubljana Slovenia		
Full name of second joint inventor, if any	Tanja ROZMAN PETERKA		
Inventor's signature		Date _	(day/month/year)
Residence	3000 Celje, Slovenia		
Citizenship	citizen of Slovenia		
Post Office Address	UI. Frankolovskih zrtev 11a 3000 Celje Slovenia		

IMPORTANT: Before this declaration is signed, the patent application (the specification, the claims and this declaration) must be read and understood by each person signing it, and no changes may be made in the application after this declaration has been signed.

Full name of third joint inventor, if any	Jelka SVETEK		
Inventor's signature		Date _	
			(day/month/year)
Residence	1210 Ljubljana, Slovenia		
Citizenship	citizen of Slovenia		
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Full name of fourth joint inventor, if any	Alenka PARIS		
Inventor's signature		Date _	
			(day/month/year)
Residence	1000 Ljubljana, Slovenia		
Citizenship	citizen of Slovenia		
Post Office Address	UI. Bratov Ucakar 22 1000 Ljubljana Slovenia		
Full name of fifth joint inventor, if any			
Inventor's signature		Date _	(day/month/year)
			(say, monanyour)
Residence			
Citizenship			
Post Office Address			